## PREPARATION AND FILING OF CJA FORM 31

FILING INSTRUCTIONS. Complete Items 2, 5, 7, 8, 9, 11, 15, 16, 17 & 18 on the CJA Form 31 voucher according to the instructions below. Attach your invoice and the last numbered page of the brief/appendix/certiorari petition to the completed voucher. Indicate on the invoice the number of unnumbered pages in the brief/appendix/certiorari petition. If more than 8 copies of a brief or 7 copies of an appendix were reproduced, state on the invoice the number of codefendants involved in the appeal. If an appendix in excess of 500 double-sided sheets was reproduced, state on the invoice the date of any order granting leave to file an oversize appendix. If duplication costs for a petition for writ of certiorari exceed \$300, attach advance authorization for the expense obtained from Court of Appeals.

Please submit the completed voucher, invoice, and supporting documentation to the attention of Patty Layne, Clerk's Office, 1100 East Main Street, Suite 501, Richmond, VA 23219-3517 by mail or hand delivery.

<u>ITEM 2</u>. **PERSON REPRESENTED:** Give the full name of the person represented. "Tab" to Item 5.

**ITEM 5. APPEALS DKT. NUMBER:** Enter the docket number of the appeal. "Tab" to Item 7.

<u>ITEM 7.</u> IN CASE/MATTER OF (*Case Name*): Enter short style of case, for habeas corpus appeals, this is usually the defendant v. the warden; for a direct criminal appeal, it is *U.S. vs. Defendant's Name*. If it is a multiple defendant case, enter *U.S. vs. Lead Defendant's Name*, et al. "Tab" to Item 8.

**ITEM 8. TYPE PERSON REPRESENTED:** The box for *Appellant* is marked by default. If the person represented is a party other than the appellant, click on the "x" in the appellant box to deselect it and then click on the box by *Appellee*, or *Other*. The *Other* category includes 28 U.S.C. §2244 - Motions for Authorization to File a Successive Habeas Petition.

**ITEM 9. REPRESENTATION TYPE:** Click on the box by *D1*, *D2*, *D3*, or *D4 Other. Other* includes 28 U.S.C. §2244 - Motions for Authorization to File a Successive Habeas Petition. "Tab" to Item 11.

**ITEM 11. ATTORNEY'S STATEMENT:** The attorney for the defendant shown in Item 2 must sign and date this section. Click on the box by *Panel Attorney* or *Retained Attorney*. Enter the attorney's name, mailing address, and telephone number. "Tab" to Item 15.

<u>ITEM 13.</u> TYPE OF SERVICE PROVIDER: Box number 23 has an "x" by *Duplication Services*. This is for duplication of briefs, appendices, and petitions for writs of certiorari only; petitions for rehearing must be copied in-house by the attorney as the Court does not reimburse commercial printers for such costs.

**ITEM 15. STAGE OF PROCEEDING:** For appeals arising from capital prosecutions or \$2255 motions attacking federal capital convictions, click on box e or f. For appeals arising from habeas corpus petitions, check box j or k. For Motions for Authorization to File a Successive Habeas Petition under 28 U.S.C. \$2244, check box o. "Tab" to Item 16.

<u>ITEM 16.</u> SERVICES AND EXPENSES: Click on line "c", *Other Expenses*, and enter the amount claimed. The total will automatically appear on the *GRAND TOTALS (CLAIMED AND ADJUSTED)* line. Duplication services totaling less than \$100 must be claimed on counsel's CJA30 Voucher, rather than through a separate CJA31 Voucher. Duplication services for appendices in excess of 500 pages or certiorari petitions costing more than \$300 require advance authorization of the Court of Appeals.

<u>ITEM 17.</u> PAYEE'S NAME AND MAILING ADDRESS: Click on Item 17 and enter the name and address of the printing firm, the Taxpayer Identification Number (TIN), and the telephone number. Enter the date the brief was filed in the Clerk's Office in both spaces on *Claimant's Certification for Period of Service From* \_\_\_\_\_\_\_ *To* \_\_\_\_\_\_. The dates must be entered using month/date/year (e.g. 12/5/99). If service includes filing of the opening and reply briefs, enter the filing date for the opening brief in "*From*" and the filing date for the reply brief in "*To*." An authorized representative of the Payee must sign and date this section.

<u>ITEM 18</u>. CERTIFICATION OF ATTORNEY: The attorney for the defendant shown in Item 2 must sign and date this section.